PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/771,593 TRANSMITTAL Filing Date 02/02/2004 First Named Inventor **FORM** Hamz Yilmaz Art Unit 2826

Examiner Name Victor A. Mandala (to be used for all correspondence after initial filing) Attorney Docket Number YMZ004 US Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)										
V	Fee Transmittal Form			Drawing(s) Licensing-related Papers			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences			
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s)			declaration(s) Request ment Request sure Statement Priority	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks Please charge any unpaid fee(s) or underpayment			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Credit Card Payment Form Return Postcard			
	Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm Name Silicop Valley Patent Group				ıp LLP						
Signature			5	Stereber						
Printed name David E. Steuber										
Date 01		01/17/2	007	Reg. No.			25,557			
CERTIFICATE OF TRANSMISSION/MAILING										
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:										
Signature Stucke										
Typed or printed name David E. Steuber			David E. Steuber					Date	01/17/2007	

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PTO/SB/17 (12-04v2)

Fees Paid (\$)

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Under the Parel work Reduct	ion Act of 1995	no persons are required	d to resi	nond to a collection	n of inforr	nation unless it disola	vs a valid OMR control number	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
				Application Number 10/771,593				
│ FEE TRANSMITTAL │				Filing Date		02/02/2004		
Fo	r FY 2	005		First Named Inv	entor/	Hamza Yilmaz		
			$\dashv \Gamma$	Examiner Name	•	Victor A. Mandal	la	
Applicant claims smal	l entity status	. See 37 CFR 1.27	_	Art Unit		2826		
TOTAL AMOUNT OF PAY	MENT (\$)	690		Attorney Docke	t No.	YMZ004 US		
METHOD OF PAYMEN	T (check all	that apply)						
Check Credit	Card 1	Money Order	None	Other (p	olease ide	ntify):		
Deposit Account	Deposit Accoun						ev Patent Grn	
Deposit Account Deposit Account Number: 50-2263 Deposit Account Name: Silicon Valley Patent Grp For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any a	dditional fee	(s) or underpayments	of fee(~ =		erpayments	,	
under 37 CFI WARNING: Information on thi	R 1.16 and 1. s form may be	17 come public. Credit ca	rd info		•		Provide credit card	
information and authorization	on PTO-2038							
FEE CALCULATION								
1. BASIC FILING, SEAF	R CH, AND I FILING I			N. 5550	EV.44			
		mall Entity	EARC	H FEES Small Entity	EXAM	INATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	ee (\$)	Fee (\$)	Fee		Fees Paid (\$)	
Utility	300	150 5	500	250	200	100	0	
Design	200	100 1	00	50	130	65	0	
Plant	200	100 3	300	150	160	80	0	
Reissue	300	150 5	00	250	600	300	0	
Provisional	200	100	0	0	0	0	0	
2. EXCESS CLAIM FEI	ES					F (A)	Small Entity	
Fee Description Each claim over 20 (including P	aiccuac)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25	
Each independent cla)			200	100	
Multiple dependent of			,			360	180	
Total Claims					Multiple D	ependent Claims		
5 - 20 or HP =	0	x <u>25</u> =		0		Fee (\$)	Fee Paid (\$)	
HP = highest number of tota Indep. Claims	•	. •	F 5	_14 (#\		0	0	
5 - 3 or HP =	Extra Clain	<u>rs </u>		Paid (\$) O				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction th	ereof. See		(G) ar	nd 37 CFR 1.1	6(s).		(\$) Fee Paid (\$)	

SUBMITTED BY			
Signature	WE Stenly	Registration No. (Attorney/Agent) 25,557	Telephone 408-982-8201
Name (Print/Type)	David E. Steuber		Date 01/17/2007

/50 = _____ (round up to a whole number) x

_ - 100 =

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 3 mo. extension of time; submission of IDS

4. OTHER FEE(S)

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